

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/310,294 Confirmation No.: 8643  
Applicant : Yonah Schmeidler, et al.  
Filed : 05/12/1999  
Group Art Unit : 2131  
Examiner : Taghi T. Arani  
Docket No. : 111283.137 US2  
Customer No. : 23483  
  
Title : Method and Apparatus for Secure Content Delivery Over  
Broadband Access Networks

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Commissioner:

Pursuant to the duty of disclosure under 37 C.F.R. §§ 1.56, 1.97 and 1.98, Applicant brings to the attention of the Examiner the documents listed on the attached Form PTO-1449.

This Information Disclosure Statement is being filed after the mailing date of a final Office Action and on or before payment of the issue fee. Please charge the \$180 fee to our Deposit Account No. 08-0219.

Applicant requests that the Examiner initial and return a copy of the enclosed Form PTO-1449 with the next communication.

Respectfully submitted,

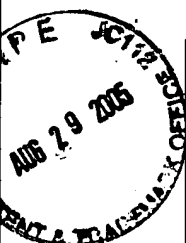
Date: August 25, 2005

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08/30/2005 MAHME1 00000023 080219 09310294

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Subt. For, PTO-1449				Docket Number	Application Number
<b>INFORMATION DISCLOSURE IN AN APPLICATION</b>  (Use several sheets if necessary)				111283.137US2	09/310,294
				Applicant <b>Schmeidler et al.</b>	
				Filing Date <b>May 12, 1999</b>	Group Art Unit <b>2131</b>
Sheet	1	OF	1		

U.S. Patent Documents				
Examiner Initial	Document Number	Publn. Date mm-dd-yyyy	Name Of Patentee Or Applicant Of Cited Documents	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear
	US-5,757,908	May 26, 1998	Cooper et al.	
	US-5,812,776	Sep. 22, 1998	Gifford	
	US-5,971,277	Oct. 26, 1999	Cragun et al.	
	US-6,065,117	May 16, 2000	White	

Foreign Patent Documents					
Examiner Initial	Cite No.	Foreign Patent Document	Publn. Date mm-dd-yyyy	Country	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear
		Country Code-Number-Kind			

Examiner's Initial	Other Documents (Including Author, Title, Date Pertinent Pages, Etc.)	

EXAMINER	DATE CONSIDERED
EXAMINER: Initial if citation is considered, whether or not citation is in conformance with MPEP § 609: Draw Line through citation if not conformance and not considered. Include copy with next communication to applicant.	



Subt. For, PTO-1449

**INFORMATION DISCLOSURE  
IN AN APPLICATION***(Use several sheets if necessary)*Docket Number  
**111283.137US2**Application Number  
**09/310,294**Applicant  
**Schmeidler et al.**Filing Date  
**May 12, 1999**Group Art Unit  
**2131**Sheet **1** OF **1****U.S. Patent Documents**

Examiner Initial	Document Number	Publ. Date mm-dd-yyyy	Name Of Patentee Or Applicant Of Cited Documents	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear
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**Foreign Patent Documents**

Examiner Initial	Cite No.	Foreign Patent Document Country Code-Number-Kind	Publ. Date mm-dd-yyyy	Country	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear

Examiner's  
Initial**Other Documents (Including Author, Title, Date Pertinent Pages, Etc.)**


EXAMINER

DATE CONSIDERED

**EXAMINER:** Initial if citation is considered, whether or not citation is in conformance with MPEP § 609: Draw Line through citation if not conformance and not considered. Include copy with next communication to applicant.



<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/310294-Conf. #8643
		Filing Date	May 12, 1999
		First Named Inventor	Yonah SCHMEIDLER
		Examiner Name	T. T. Arani
		Art Unit	2131
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	0111283.00137US2
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 180.00		

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>08-0219</u> Deposit Account Name: <u>Wilmer Cutler Pickering Hale and Dorr LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>
<input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
<b>2. EXCESS CLAIM FEES</b>							
						<u>Small Entity</u>	
						<b>Fee (\$)</b>	<b>Fee (\$)</b>
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>		
_____ - 20 = _____		x _____	= _____		<u>Fee (\$)</u> <u>Fee Paid (\$)</u>		
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
_____ - 3 = _____		x _____	= _____				
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
_____ - 100 = _____	/50	_____ (round up to a whole number) x _____	= _____				
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)						<u>Fees Paid (\$)</u>	
Other (e.g., late filing surcharge): <u>1806 Submission of an Information Disclosure Statement</u>						<u>180.00</u>	

<b>SUBMITTED BY</b>			
Signature	<u>Monica Grewal</u>	Registration No. (Attorney/Agent)	40,056
Name (Print/Type)	Monica Grewal	Telephone	(617) 526-6000
		Date	August 25, 2005

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: August 25, 2005	Signature: <u>Lisa A. Calder</u> (Lisa A. Calder)